Foster Care Maintenance Payments Policies and Procedures Manual

Service Chapter 623-05

North Dakota Department of Human Services 600 East Boulevard Dept. 325 Bismarck, ND 58505-0250 Division 20 Program 600 Service 623 Chapter 05

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Foster Care Maintenance Payments Policies and Procedures 623-05

(Revised 4/25/16 ML #3469)

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All concepts of this chapter apply to Title IV-E (Title IV-E of the Social Security Act), regular match, and emergency assistance foster care payments. Payments may only be issued to a licensed or approved provider who meets full compliance with licensing standards. Eligible and reimbursable maintenance and irregular expenditures as outlined in this chapter are reimbursed with Title IV-E and/or state funds depending on the funding match determined through the eligibility process. Foster care reimbursement for children under the custody of a ND Tribal Social Service Agency in which there is an agreement with the NDDHS is limited to Title IV-E children only.

An eligibility determination must be completed for all children in foster care to determine if they are entitled to state or federal benefits. The AFDC requirements of July 16, 1996 are used when determining North Dakota foster care eligibility.

County Eligibility staff will determine eligibility for the foster care program. The case manager from a county, DJS, or Tribe is responsible for obtaining the information needed to determine eligibility. Detailed policy reflecting the eligibility criteria a child must meet before eligibility can be established and Title IV-E funds claimed is found in Policy Manual Chapter 447-10 "IV-E Foster Care Eligibility".

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Definitions 623-05-05 (Revised 4/25/16 ML #3469)

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Applicant - A parent(s), person or agency having the custody of a dependent child making application for aid for such child under the provisions of Chapter 447-10. A foster child that reaches the age of 18 years may make an application in his or her own behalf.

Correction Facility – An institution where juvenile offenders can be temporarily held and are usually under the supervision of a juvenile court. Examples include a Detention Center, Youth Correction Center, etc. A child is not considered to be in foster care and no foster care payments can be expended for a youth in a correctional placement.

Custodian or Custodial Agency - The agency to which the court has given responsibility for care, custody and control, or for placement and care of the child. This may be a county social service board, the Division of Juvenile Services, tribal social services, or the Executive Director of the North Dakota Department of Human Services.

Foster Care - Hereafter in this chapter, the general term foster care may include care in foster family homes, group homes, residential child care facilities, residential treatment centers, and psychiatric residential treatment facilities.

Foster Care Maintenance Payment - Payment to cover the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to a child, and reasonable travel to the child's home for visitation and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. In residential care, reasonable costs of administration are included. In addition to maintenance payments, certain administrative and service payments are allowable. Hereafter in this chapter when the shorter terms "foster care payment" or "maintenance payments" are used, it means the foster care maintenance payment.

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Family Foster Home - An occupied private residence in which foster care for children is regularly provided by the owner or lessee thereof to no more than four children. Exception: unless <u>all</u> the children in foster care are related to each other by blood or marriage, or unless the department approves otherwise for the placement of siblings, in which case the limitation shall not apply.

Group Home - A residence in which foster care is regularly provided for four or more, but less than thirteen unrelated children.

Irregular Payment - Reimbursement with foster care fund for fees/expenses that meet the irregular category definition and criteria incurred by a foster care provider on behalf of a foster care child. The irregular categories reimburse for expenses over and above the standard maintenance payment which covers the basic care and needs of the foster care child.

Licensed Relative Homes - A relative may request to have his or her home licensed or approved in order to receive a foster care maintenance payment. If the home meets the standards for licensure or approval and if the child(ren) in question otherwise meets all requirements of foster care, the appropriate foster care daily rate must be paid. There is a relative waiver option that can be considered for relatives only specific to non-safety related licensing compliance.

Psychiatric Residential Treatment Centers (PRTF's) - Accredited residential treatment centers that provide inpatient psychiatric services for eligible individuals under age 21. Foster youth placed in PRTF's will be processed under regular Medicaid rules. In order for Medicaid to pay for the individual's care, a certificate of need will be required.

Residential Child Care Facility- A facility other than an occupied private residence providing foster care to thirteen or more unrelated children.

Residential Treatment Center for Children- A licensed facility that provides residential treatment for mentally ill persons who are children

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within the meaning of NDCC section 27-20-02 or who are minors. Effective July 1, 2006, residential treatment facilities in-state and some out-of-state, that are accredited and providing inpatient psychiatric services will be referred to as Psychiatric Residential Treatment Facilities (PRTF's).

Tribal Title IV-E Care Payments - ND Tribal Social Service Agencies have access to Title IV-E funding through an agreement with NDDHS to receive payment on eligible Title IV-E foster care cases. Foster care payment to providers licensed or approved by the Tribe can only be made if the provider meets the Department of Human Services standards or equivalent and such standards have prior approval of the Department of Human Services.

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Authority References 623-05-10 (Revised 8/15/06 ML #3025)

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- 1. Chapter <u>50-11</u> of the North Dakota Century Code (Foster Care Homes for Children and Adults)
- 2. Chapter <u>50-09</u> of the North Dakota Century Code (Aid to Dependent Children)
- 3. Chapter <u>27-20</u> of the North Dakota Century Code (Uniform Juvenile Court Act)
- 4. Chapter <u>50-06-15</u> of the North Dakota Century Code (The Department of Human Services Confidentiality)
- 5. Title IV-E of the Social Security Act
- 6. Title IV-B of the Social Security Act
- 7. Title XIX of the Social Security Act

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General Information 623-05-15

Purpose of Payment 623-05-15-05 (Revised 4/25/16 ML #3469)

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A foster care maintenance payment is to reimburse fully licensed foster care providers for care, protection, and other material necessities needed for an eligible foster child.

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Confidentiality 623-05-15-15 (Revised 8/15/06 ML #3025)

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Information related to foster care and subsidized adoption is confidential. Refer to NDCC 50-06-15 of the North Dakota Century Code, and to NDDHS Manual Chapter 110-01 for further information.

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Retroactive Payments 623-05-15-20 (Revised 4/25/16 ML #3469)

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It is the responsibility of the custodial agency to obtain and submit the required documents for eligibility determination to the administrative county within 45 days of a foster care placement. See Policy Manual Chapter 447-10 regarding application.

Retroactive payments in excess of 90 days are not allowed. When payments cannot be made due to the custodial agency failing to provide the necessary eligibility documents timely, the custodial agency is responsible for the foster care expenditures in excess of the 90 days from the date the eligibility worker received all eligibility documentation enabling them to complete the eligibility determination.

Example: Child enters foster care on 4/1/2015. Eligibility worker does not receive all of the necessary documents to determine eligibility until 7/15/2015; 106 days after the child was placed in foster care. Counting back 90 days from 7/15/2015 will allow payments to begin on 4/17/2015. Payments for 4/1/2015 to 4/16/2015 are not payable with foster care funds and are the custodial agency's responsibility.

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Financial Responsibility for Foster Care Payment 623-05-15-30

(Revised 1/26/07 ML #3051)

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The county of financial responsibility may arrange with another county to perform certain activities such as provision of on-going services, and payment management. This will always be done through a written agreement, "Placement Agreement Between Counties," which is negotiated between the involved counties and pertains to financial or service activities. This is a county form used whenever a child is placed by the financial county into family foster care in a different county. It is not used in therapeutic family foster care or group/RCCF/RTC/PRTF care.

The "county having financial responsibility" means the county where the child's parent has or had residence at the time of court intervention. The county of financial responsibility could change after a 60-day lapse in placement. If the parents do not have residence in North Dakota, then the financial responsibility exists in the county where the child resided at the time of court intervention.

(Definition developed by County Directors, 1997).

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Responsibilities of County of Financial Responsibility 623-05-15-30-05

(Revised 10/1/08 ML #3158)

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Financial responsibility for the case always rests with the "financial county."

The financial county generates the Foster Care Payment information on the appropriate CCWIPS screen unless an agreement to do so is negotiated with another county. If an agreement exists with another county, refer to CCWIPS Manual.

The county of financial responsibility maintains all case management responsibility not vested in the custodian. In cases where the financially responsible county is also the custodian, the county has complete responsibility for the case, including eligibility and payment and all activities associated with placement and supervision of the child.

In certain circumstances, the financial/custodial county may negotiate an agreement with another county to provide specific services, such as placement and supervision. In such an instance, the financial/custodial county remains responsible for ensuring that permanency planning takes place, and that the case is documented, for example, in preparation for audit.

Therapeutic Family Foster Home, Group/RCCF/RTC/PRTF Facility:

1. Therapeutic Family Foster Home:

In therapeutic family foster care, the financial county for purposes of therapeutic family foster home cases is similar to the procedure for children in group/RCCF/RTC/PRTF care. The custodian refers the child, ensures that permanency planning takes place, maintains the county case file for purposes of ensuring that custodial duties are carried out and compliance issues met. Therefore, for purposes of therapeutic family foster care, the county of financial responsibility

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for eligibility and payment in most cases is the custodial county. In special circumstances there may be exceptions to this. Please refer questions to the regional human service supervisor.

2. Group/Residential Child Care Facility

The county of financial responsibility for children and youth in foster care in group and/or residential child care facilities, in or out of state, is the county where the child's parent has residence at the time of court intervention. Financial responsibility will remain with that county as long as the individual remains in care.

3. Subsidized Adoption

<u>Prior to adoption</u>, follow above guidelines for family foster care. Refer to Subsidized Adoption Manual Service Chapter 617-05 for further information.

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Interstate Compact: Children Receiving Foster Care Payments 623-05-15-35

(Revised 4/25/16 ML #3469)

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When a child is placed for foster care in another state the placement will be made through Interstate Compact on the Placement of Children (ICPC) and the child does not by such absence lose legal residence in North Dakota.

If parents move from North Dakota, eligibility for foster care payment with respect to residence continues in North Dakota.

When North Dakota is the receiving state in an Interstate Compact placement and the child is placed with a licensed family foster home in North Dakota, the sending agency must reimburse the provider at a rate consistent with North Dakota's foster care prevailing reimbursement rate.

When North Dakota is placing (sending) a child in another state through Interstate Compact, North Dakota will reimburse the provider in the receiving state at the receiving state's prevailing rate, not the North Dakota rate. ICPC approval is necessary prior to making any foster care payments. Foster Care funds cannot be used to fund an illegal placement.

Foster care funds cannot be used to fund an unlicensed provider or a placement that does not meet ICPC compliance/approval from Children & Family Services. For more information, see the ICPC Manual Chapter 619-01.

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Payment Eligibility Requirements 623-05-15-40 (Revised 4/25/16 ML #3469)

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Foster care payment is available to any foster child under 21 years of age who:

- 1. Is determined eligible based on the AFDC eligibility criteria;
- 2. Is under the custody of a public agency, and
- 3. Resides with a licensed provider.

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Child Support: Parental Responsibility for Children in Foster Care 623-05-15-45

(Revised 4/25/16 ML #3469)

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N.D.C.C. Section 50-09-06.1 applies to all foster care for children.

An application under this chapter is deemed to create and effect an assignment of all rights to support, which a family member or foster child may have or come to have, to the state agency. The assignment:

- 1. Is effective as to all current and accrued support obligation and periods of eligibility;
- 2. Is limited to the total cost of benefits provided to the family or foster child; and
- 3. Terminates when eligibility ceases, except with respect to any support obligation unpaid at that time.
- 4. Is not effective as to any child subject to a benefit cap imposed under section 50-09-29.

Federal law requires states to take all necessary steps to enforce the assignment of support rights and, if necessary, establish support orders on behalf of children receiving foster care. N.D.C.C. Section 50-09-06.1 provides that all support obligations are automatically assigned to the state when it is determined that a child is eligible for foster care. The assignment is not conditioned upon the consent of the parents. See Manual Chapter 447-10 for policy and procedures relating to child support referrals.

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Child Support Referrals 623-05-15-45-05 (Revised 4/25/16 ML #3469)

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County Social Service Boards (Administrative County) must submit a child support referral on each parent whose child is in foster care. There are two exceptions to making a child support referral. A referral will not be made against either parent;

- 1. If one of both parents receive a subsidized adoption payment on behalf of a child in foster care, or
- 2. If the child's placement was short-term. For purposes of this exception, "short-term" is defined as follows:
 - a. The child exited the placement by the time the referral would be sent, and
 - b. The child was in the placement for 60 days or less.

Both criteria <u>a and b</u> must be met in order for the referral to be eliminated (i.e., not made). If the child is in placement at the time of referral, a referral is made regardless of the amount of time the child has been in placement.

Special circumstances may also apply when submitting the referral; those include:

- 1. DA = Donor Assisted Conception
- 2. OT = Other special circumstances reason
- 3. SP = Single parent adoption
- 4. TR = Terminated Parental Rights

The Department of Human Services uses automated systems to transmit and receive referrals. Child support referrals must be completed and transmitted in CCWIPS. The referral information sent to the Child Support Division is used to establish paternity, locate the absent parent(s), and establish and enforce a support order. The referral may be transmitted by the County Social Service Board to Child Support at any time following

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placement, but is required to be transmitted at the time of initial payment authorization.

Once a child support referral is in an open status, child support collected on behalf of the child will automatically be allocated to the North Dakota Department of Human Services to offset the amount expended for foster care while the child is in a paid placement. When a child's placement is closed/ended, the child support referral will revert to "close pending" and remain in a monitor status until the child's foster care program is closed or a new placement is entered.

Excess Child Support Payments:

The legal custodian will be sent any child support collected that is in excess of the foster care expenditures for any month in which the child was in a paid placement. In months in which a child transitions between paid and non-paid placements, the collected amount in excess of the foster care expenditures for that month will be sent to the custodial agency. The custodial agency should verify with the Administrative county and Child Support the reason for the direct payment to the agency. Several circumstances will impact how the money is allocated:

- 1. Child Support sent to the custodian while a foster child is placed in an unpaid or unlicensed family setting.
 - a. Custodian must verify with child support the reason for the direct payment.
 - b. Arrearages collected for the time a child was in a paid placement or a medical placement must be reallocated as outlined in #2 and #3 below.
- Child Support collected to cover medical expenses for a foster child's medical placement in a psychiatric residential treatment facility or hospitalization.
 - a. Custodian must reallocate the amount collected to Medical Assistance to be applied to the amount expended for the medical placement. The custodial agency must complete an SFN 828 "Medicare Premium Repayment/Credit Report" and send the Child Support collected amount to the NDDHS Fiscal Administration detailing how to reallocate the funds.

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- 3. Child Support collected when a foster child is placed with a licensed provider (family, therapeutic home, group home, residential child care facility):
 - a. Custodian must verify with Child Support the reason for the direct payment.
 - b. Child Support collections exceeding the amount of foster care expenditures for a specific month is unearned income for the foster care child. The excess amount should be put into a savings in the child/custodian's name. The custodian should determine how to reallocate the money to best meet the needs of the child while the child is in foster care.

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Notice of Closing of Foster Care Case 623-05-15-45-15 (Revised 4/25/16 ML #3469)

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If the case has been referred to Child Support, the County Social Service Board shall notify the Regional Child Support Unit when the referral should be closed.

This notice of closing is transmitted through the automated system used by the Department of Human Services. Placement information must be entered timely into the case management data system to ensure adverse action is not taken on a closed foster care case and any payments received by Child Support are disbursed to the appropriate payee.

Reasons for a notice of closing include a child returning home, a child entering a non-paid placement, or a child entering a PRTF.

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Certification 623-05-15-50 (Revised 8/15/06 ML #3025)

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The county social service board is legally responsible for providing assistance to persons in need. Certification of eligibility for Foster Care Maintenance Payment is the responsibility of the county social service board that has financial responsibility for the foster care payment. When SFN 641, Title IV-E/Title XIX Application Foster Care, is completed, the county social service board determines eligibility for foster care payments. When the county enters and authorizes a payment on CCWIPS, the county is certifying that all information is true and correct and according to policies of the North Dakota Department of Human Services and federal HHS related to foster care payment. The authorization (PINs) is your electronic signature validation of the above.

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Child & Family Team Meeting Reports 623-05-15-60 (Revised 4/25/16 ML #3469)

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The custodial case manager is responsible for co-facilitating the initial Child & Family Team meeting within 30 days of placement and must prepare and enter the initial case plan into FRAME. Child and Family Team Meetings are done on a quarterly basis.

Approval of irregular payments and the foster care maintenance rate for an out of state placement should be documented in the Child & Family Team Meeting notes. The case manager must provide the eligibility worker with a copy of the Child & Family Team Meeting notes in order for authorization of such payments to occur.

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Voluntary Placement Agreement 623-05-15-65 (Revised 4/25/16 ML #3469)

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Voluntary placement agreements between the parent and an agency are the sole responsibility of the county or tribal social service agency. The voluntary placement agreement is limited to 45 days of placement for children under the age of 18 and requires the approval of the regional supervisor.

NDDHS Children & Family Services does not participate in payment for voluntary placements when a public agency does not have care, custody, and control of the child. If voluntary treatment is a desire of the family, the families are to be redirected to the NDDHS Behavioral Health Division Voluntary Treatment Program in an effort to avoid unnecessary relinquishment of parental custody.

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Division of Juvenile Services (DJS) Foster Care Payments 623-05-15-75

(Revised 4/25/16 ML #3469)

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The Division of Juvenile Services (DJS) through an agreement with the NDDHS is able to access foster care payments for children under the custody of DJS that are placed with a fully licensed foster care provider. Eligibility is determined and payments are authorized by the administrative county.

The DJS representative is responsible for:

- Obtaining and providing the administrative county with the necessary placement/application forms and court orders required to determine eligibility.
- 2. Maintaining the FRAME case.
- 3. Notifying the Eligibility Worker timely of any placement changes (SFN 45).
- 4. Providing the Eligibility Worker with copies of the current court orders.
- 5. Closing a placement timely when the child exits foster care.

Children under the custody or supervision of DJS who are removed from their home and initially placed in the Youth Correctional Center (YCC), or non-foster care arrangement, are not entered into FRAME. If at a later point the child enters a paid foster care placement, the case is then entered into FRAME by the DJS case manager effective the date of the paid placement. Subsequently when a child leaves a paid placement, the DJS case manager must update the placement setting as soon as possible. If the placement change is into a non-foster care setting, but the child is expected to return to foster care, the foster care program will remain open and the placement setting updated. If the child is not expected to return to a paid foster care placement, the foster care program and case must be closed by the DJS case manager.

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School Lunch Program Eligibility 623-05-15-80 (Revised 4/25/16 ML #3469)

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The School Lunch Program is administered by the Department of Public Instruction and supervised by the local school administrator.

The Healthy, Hunger-Free Kids Act of 2010 provides categorical eligibility for free meals to foster children. The school or child care must be notified that the child is a foster child. Once notified, the school/child care must serve meals to those children free of charge. Proof that the child is in foster care may be requested.

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Matching Symbols 623-05-15-90 (Revised 4/25/16 ML #3469)

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Match symbols are a result of the eligibility determination for the child made by following Policy Manual Chapter 447-10. Every foster care payment must have a match symbol identified in order to authorize payment.

FOSTER CARE	SYMBOL	SOURCE OF FUNDS FOR MAINTENANCE
Federal Matching	FM	Federal participation with 100% state sharing of non-federal funds (same as former AFDC formula)
Federal Matching Non-reimbursable (Title IV-E eligible/not reimbursable)	FN	100% state
Federal Matching Indian	NA	Federal participation and 100% state funds for non-federal share
Emergency Assistance (10/1/1999)	EA	75% federal and 25% state
Regular	RM	100% state
Regular Match Indian	NR	100% state

The payment system has additional codes (SA, SF, SR, SN) if the child is in receipt of sub-adopt payments. Please see Policy Manual Chapter 617-05.

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FM/FN Match Symbol 623-05-15-95 (Revised 4/25/16 ML #3469)

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When a child is Title IV-E eligible, not in receipt of SSI, and in a primary placement, the match symbol of "FM" must be used in the payment authorization.

Children Title IV-E eligible in receipt of SSI, or in a secondary placement will remain Title IV-E eligible, but are non-reimbursable with Title IV-E funds. Both Title IV-E and SSI are federally funded programs. Policy prohibits claiming reimbursement from two separate federally funded programs for the same foster care expenditures. Secondary placements are non-reimbursable with federal funds as federal funds are already claimed through the primary placement authorization. The match symbol of "FN" must be used for the payment authorization for months in which SSI is received and for all secondary placements for Title IV-E eligible children.

Example: Mom with 2 children, one child receives SSI. Mom and other child are in receipt of TANF benefits. Child with SSI is placed in foster care. The SSI is more than the cost of care, in turn the county continues to receive the SSI payment. In this example, the foster child is Title IV-E eligible, however not reimbursable due to the continued receipt of the SSI and the proper match code in this example would be "FN."

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NA/NR Match Symbol 623-05-15-100 (Revised 4/25/16 ML #3469)

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The NA and NR match symbols are limited to the ten counties of financial responsibility as noted in Policy Manual Chapter <u>447-10</u>. These match symbols apply to any Native American foster child whose parent(s) lived on the reservation at the time the child entered foster care.

The "NR" code should only be used in cases when:

- 1. There is a secondary placement of an "NA" Federal Matching Indian case, or
- 2. DJS has custody of Native American foster child whose parents live on the reservation at the time and the child is not IV-E eligible.

A child under tribal custody who is coded Native American Federal Match "NA" will lose Title IV-E eligibility when s/he turns 18 years of age and will not graduate prior to age 19. The case must be closed as of the last day of the month in which s/he turns 18. At this point, the tribe becomes financially responsible for the case.

If a Title IV-E tribal youth ages out of North Dakota foster care, he/she is eligible to remain in or return to 18+ Continued Foster Care.

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Match Symbol for Secondary Placements 623-05-15-105 (Revised 4/25/16 ML #3469)

View Archives

For a Title IV-E eligible foster child, "FM" who is placed into a secondary placement (i.e. pre-placement visits), the secondary placement must be coded "FN."

For a Title IV-E eligible foster child, "NA" who is placed into a secondary placement, the secondary placement must be "NR".

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Payment Factors 623-05-20

Payment - General Principles 623-05-20-05 (Revised 4/25/16 ML #3469)

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All foster care standard maintenance payments must be authorized the last week of the month prior to the scheduled standard check write. NDDHS has an established payment schedule for various programs. The calendar of payment dates is sent to all foster care providers the end of each calendar year, showing which date of the month the foster care standard maintenance payment will be issued from NDDHS and either mailed or direct deposited into the account of the provider.

Overlapping Payments

In general, when a child moves from one foster care placement to another during a month, payment should be made to each provider for the day of the move. The overlapping date can be paid when a child's placement changes from:

- a facility to another facility not under the same umbrella agency.
- a facility to a family foster home or to a PATH home.
- a PATH home to a family foster home (not PATH) or facility.
- a family foster home to a facility or PATH provider.

The exception to this rule is when the placements are within the same provider or umbrella agency. PATH and dual-licensed facility providers fall under the overlapping date exception.

Examples:

- 1. When a child moves from one PATH provider to another PATH provider, only one provider is paid for the move date.
- When a child moves from one level of care to a higher or lower level of care within the same facility; the umbrella facility is only paid for one day.

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	Start Date	End Date
DBGR - PRTF	1/1/03	6/14/03
DBGR - RCCF	6/15/03	

Features of the CCWIPS system are:

- 1. Providers will receive one payment during the regular monthly check write, for all children placed in their care.
- 2. The monthly payment will be accompanied by a remittance advice showing each segment of every payment included for each child's care.
- 3. The main check write will be the second to the last working day each month, with the opportunity to issue weekly supplemental payments as needed.
- 4. All maintenance payments will be paid at a daily rate. This means that payment amounts will vary from month to month. The remittance advice accompanying the payment will provide a detailed explanation.
- 5. County social services, Division of Juvenile Services, and Regional Human Service Centers are responsible for entering court order, placement, provider and care plan information into FRAME and CCWIPS in order to generate a payment to the applicable provider.
 - a. A full payment will calculate when a court order, provider license, placement date, and care plan is current for the payment month.
 - b. A partial payment will calculate when a court order, provider license, or placement date expires or ends prior to the last day of the payment month.
 - c. No payment will calculate when a court order, provider license, placement ends, or no current care plan in place prior to the payment month.
 - d. Over or under payments may occur when additional information is entered, which effect the payment calculation. Once all information has been updated, a payment may be issued during the next supplemental check write.
- 6. Questions about the timeliness or amount of a foster care payment will be directed to the county office responsible for processing the payment.

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- 7. Questions regarding subsidized adoption payments can be directed to the central office, CFS Adoption Administrator.
- 8. Deductions from foster care maintenance payments cannot be withheld from unpaid obligations incurred by the foster care provider on behalf of the foster child, such as child care, etc. Such obligations are the responsibility of the foster care provider.
- 9. Providers are encouraged to set up direct deposit to receive maintenance payments more quickly (typically within 24 working hours of the date in which NDDHS issues payment). If a provider chooses to get a paper check sent in the mail, NDDHS is not responsible for timeliness of the US Postal Service.
 - a. Direct Deposit information can be sent to CFS. A provider must show verification by providing a bank direct deposit form or a voided check indicating the bank routing number and account number. The provider should indicate if the account is savings or checking and also if they are a subsidized adoption or a foster care provider.

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Reimbursement by County 623-05-20-10 (Revised 8/15/06 ML #3025)

View Archives

County responsibility for reimbursement to the state regarding foster care is handled according to N.D.C.C. Section 50-09-21.1, for all periods after January 1, 1998.

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Remitting Overpayments/Reimbursements 623-05-20-15 (Revised 4/25/16 ML #3469)

View Archives

Any payments to the state for foster care refunds and reimbursements must be submitted to NDDHS/Fiscal Administration with a completed credit form, <u>SFN 827</u>. The client name and foster care case number must be included to ensure proper credit.

Example One: County worker receives a check from the facility for reimbursement of care costs by BC/BS. This would be entered as accounts receivable in CCWIPS and coded as "other" as per CCWIPS User Manual. The county would then send the BC/BS payment to the NDDHS Fiscal Administration office for credit towards the overpayment.

Example Two: The child in foster care receives monthly income of Social Security Survivors benefits. This would be entered as income for the child and the amount of care costs forwarded to the NDDHS Fiscal Administration office to be credit towards the care costs. Keep in mind, any money in excess of the care costs will be handled as per Policy Manual Chapter <u>447-10</u>. Refer to the CCWIPS User Manual for procedures regarding accounts receivable.

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Recoupment of Foster Care Overpayments 623-05-20-20 (Revised 4/25/16 ML #3469)

View Archives

CCWIPS has the ability to recoup overpayments from foster care providers for amounts due the Department. The payment system has the ability to automatically subtract any debits (such as the overpayment) to that provider for any foster child.

The procedure for overpayment recoupment is as follows:

- Overpayments made to foster care providers are recouped in CCWIPS the month following the month the overpayment is set up in the payment system, assuming that any foster child is residing in the home and/or a payment is being made to that provider. This direct recoupment is a central office, CFS, function only.
 - a. CCWIPS can only recoup from the standard check write. For providers where a placement continues and an overpayment has occurred, CFS will set up the auto-recoupment specific to that provider. Payment authorization must be made after the last supplemental check write and before the standard check write in order for the auto-recoupment to process that month.
- 2. If no payment is due to the foster care provider in the month following the month the overpayment is set up, the county collects the overpayment from the foster care provider and sends the overpayment remittance to NDDHS Fiscal Administration with a completed credit form (SFN 827).
- 3. NDDHS Fiscal Administration will age unresolved balances and at the three month point will bill the financially responsible county dollar for dollar. Indian county cases in need of overpayment reimbursement will be reviewed and handled on a case-by-case basis.

Collections:

If recoupment from a foster care provider cannot be accomplished, NDDHS will work to collect the overpayment through a collection agency. If the

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agency does collect the overpayment from the provider, the money will be paid to NDDHS and the CCWIPS payment record will be adjusted accordingly. If the collection agency holds the account for six years and does not have success in collecting the overpayment, state law requires the collection agency to return the account to NDDHS.

NDDHS can make the determination to close the CCWIPS foster care overpayment if the account was returned to NDDHS from a collection agency after six years and the overpayment amount does not exceed a value approved by Fiscal Administration.

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Payment Rates 623-05-20-25 (Revised 4/25/16 ML #3469)

View Archives

The family foster care rates are reviewed and revised annually, based on legislative action. The standard family foster care maintenance rate includes the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, and liability insurance with respect to a child.

The family foster care maintenance rate is computed by month and includes an amount for clothing and incidentals. The rate effective July 1, 2015, is as follows:

CHILD	BASIC	CLOTHING AND	COMPUTED
AGE	RATE	INCIDENTALS	MONTHLY
			(30 days)
0 - 4 Years	\$720.32	\$55.00	\$775.32
5 - 12 Years	\$823.79	\$65.00	\$888.79
13+	\$900.06	\$75.00	\$975.06

Payments are made using the daily rate times the number of days in care.

CHILD	COMPUTED COMPUTED	PAID
AGE	MONTHLY	DAILY
0 - 4 Years	\$775.32	\$25.49
5- 12 Years	\$888.79	\$29.22
13+	\$975.06	\$32.06

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Absences from Placement 623-05-20-30 (Revised 4/25/16 ML #3469)

View Archives

If a child is out of a placement for 14 days or less under a plan which meets the approval of the custodian, and the intention is for the child to return to that same provider, there will be no reduction in the standard maintenance payment. Placement must be ended on the date it is determined that the child will not or is unable to return to the same primary provider. Foster care payments cannot be made to the primary provider for any days exceeding the 14 days in which the child was absent from the placement.

An absence that extends past the 14th day will require a change in placement. For example; a child has a primary placement in a foster home, they become hospitalized. The case manager will enter a secondary placement of hospitalization. Once the 14th day passes, the primary and secondary placements must be closed and the "Non-foster care" hospitalization will become the primary placement.

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Trial Home Visits 623-05-20-31 (New 4/25/16 ML #3469)

View Archives

Foster care maintenance payments are not made when a child is placed on a trial home visit.

The trial home placement ends when the child is removed from the home and placed in an out of home placement. The case manager must notify the administrative county of the change in placement.

Trial home placements cannot exceed 6 months unless ordered by the court.

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Placement Approvals 623-05-20-32 (New 4/25/16 ML #3469)

View Archives

The regional supervisor must approve all placements when a child is placed in a;

- Therapeutic Foster Home,
- Group Home or Residential Child Care Facility, or
- Psychiatric Residential Treatment Facility

The approval request must be submitted by the case manager via the Group/Therapeutic/PRTF Placement Request in FRAME. To avoid payment issues, **each** provider with whom the child is placed requires an approval and the placements must be entered in the appropriate date sequence in FRAME.

The custodial case manager should provide the eligibility worker the SFN 45 – "Notice of Change" form each time a change occurs with the case, this will ensure payment is correctly authorized to each provider and will assist in avoiding overpayments.

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Maintenance Rate - Therapeutic Foster Care 623-05-20-35

(Revised 4/25/16 ML #3469)

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ND Therapeutic Providers:

1. PATH-ND (Professional Association of Treatment Homes) 1202 Westrac Dr S, Suite 100

Fargo, ND 58103

Phone: 701-280-8545

Billing Address:

PATH ND

Rice Creek Professional Building 5985 Rice Creek Pkwy, Suite 202

Shoreview, MN 55126

PATH Maintenance Rates (July 1, 2015) Payments are made using the daily rate times the number of days in care.

LEVEL OF CARE OFFERED BY THE THERAPEUTIC PROVIDER	DAILY RATE	MONTHLY RATE (30 days)
Therapeutic Treatment PATH provides case management	\$108.18	\$3,245.40
Step Down (Regular PATH) PATH provides case management	\$66.23	\$1,986.90
County (Flow Through) Sibling placement - Custodian provides case management to the child.	Family Foster Care Maintenance Rate (Based on Child Age)	Varied

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Payments to PATH should not be authorized until a billing statement has been received for the appropriate month. PATH and the Department of Human Services shall review PATH foster care maintenance rates quarterly. Therefore it is possible that the daily rate could change on a quarterly basis.

The custodian and the child's team will evaluate the child's progress to determine the appropriate level of care. If placement in the PATH Step Down option is appropriate, the custodian and PATH will sign the needed documentation at the Child & Family Team meeting. The custodial case manager will be responsible to notify the county eligibility worker of any changes.

BILLING:

The PATH billing office will send a separate bill for each child monthly. The county should receive the bill on or around the 12th of the month. Eligibility workers must wait for the bill prior to authorizing payments. The payment amount is not automatically calculated by the payment system and will require manual input. The bill should be kept in the foster care eligibility file.

 If PATH has a placement and also has an overpayment. Eligibility must wait to authorize the standard maintenance payment until the last week of that month, after the last supplemental check write and prior to the standard check write in an effort to auto-recoup the provider overpayment.

PAYMENTS

Therapeutic and Step-Down/PATH Regular Foster Care:

The amount billed is based on the number of days in placement, not to exceed the number of days in the month. Reimbursement of overlapping days of placement from one therapeutic provider to another is not allowed.

- Example: A child changes placement from one therapeutic home to another on the 3rd of the month, only one therapeutic provider can be reimbursed for the 3rd.
- Secondary placements in a therapeutic home when a child is in a primary therapeutic placement are not reimbursable.

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 The monthly bill from the agency must provide an itemization of each placement with each provider. If the bill contains multiple providers, each provider must have an approved placement in FRAME and payment authorization must be made to each provider based on the billed dates and amount specific to that provider. Do not authorize a lump sum payment to only one provider if multiple placements exist during the billing cycle.

Irregular payments: Only two irregular payment options are allowed for Therapeutic and Step-Down/PATH Regular Foster Care:

- Travel for foster parents to transport to a school in which the youth is enrolled at the time of placement, payment code 53, and
- If the foster child has their own child (not in public agency custody) 'parent/infant' payment, code 71.

NOTE: CCWIPS will only allow irregular payment authorization for codes 53 and 71 for a licensed therapeutic provider.

County (Flow Through) Placements:

The county (flow through) rate is billed by PATH to the county monthly. The rate billed is based on the ND family foster care maintenance rate specific to the child's age.

Irregular Payments for county (flow through) placements are allowed and the same policy applies to county (flow through) placements in a therapeutic home as it does for county family foster care placements. The rate does not include irregular payments and PATH will not bill for approved irregular expenses. The reimbursement of receipts is handled through the county as follows:

- 1. All irregular payments must be approved as set forth in policy and should be documented in the Child and Family Team Meeting notes.
- 2. Case manager must provide the eligibility worker with documentation of the approved irregular expenses.
- 3. The receipts are emailed/faxed/mailed by the PATH foster care provider to a designated PATH worker and/or county case manager.
- 4. The county case manager should provide the eligibility worker with a copy of the receipts and the PATH worker will provide the PATH billing office with a copy of the receipts (unless other arrangements have been

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- made between the PATH worker and the County case managers in regard to distribution of the receipts).
- 5. PATH **DOES NOT** bill the irregular expenses for PATH county (flow through) placements to the county. They will only bill the standard rate for care. It is the responsibility of the county to reimburse the irregular payments to PATH. In turn, PATH will reimburse the foster parents the amount of payment received from the county to cover the irregular expenses; hence "flow through".
- 6. If PATH's billing office has questions regarding the amount received over and above the standard foster care rate, the county worker will be contacted for clarification.

How to Authorize the Irregular Payments for PATH County (flow through) placements in CCWIPS:

- The amount of the receipt(s) must be added to the standard maintenance payment amount.
- CCWIPS allows only two irregular payment codes to PATH providers codes 53 and 71. Therefore, irregular payments will require a payment adjustment of the monthly standard payment.
- Irregular payments for code 53 transportation to school and code 71 parent/infant care, must be authorized separately and on the irregular payment screen.

Refer to CCWIPS User manual for technical assistance related to entering PATH-ND foster care payments on the CCWIPS system.

Medicaid eligibility must be determined prior to referral of a child to PATH-ND. The treatment (rehabilitation) amount may be paid by Title XIX, or some other resource. Rehabilitation costs CANNOT BE PAID THROUGH FOSTER CARE.

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Rates & Payment to ND Foster Care Group Homes/Residential Child Care Facilities (RCCF's) 623-05-20-40

(Revised 4/25/16 ML #3469)

View Archives

NDDHS, as a purchaser of services, will establish a daily rate per NDAC 75-03-15, "Rate Setting for Providers of Services to Foster Children Group Home and Residential Child Care Facilities", for all licensed/approved North Dakota RCCF's

RCCF foster care maintenance rates include resident room and board, food, care, clothing, personal supplies, education, recreation, child service related transportation, medical expenses outside of child insurance coverage, liability insurance coverage, utilities, etc.

During a child's placement in a group home or RCCF, reimbursement may be available for eligible families to facilitate reunification efforts. Funding may be provided to cover the costs of the family expenses, meals, lodging, occasionally mileage, or commercial transportation as outlined in the irregular payment categories. North Dakota will reimburse allowable travel expenses to the facility with consideration of actual costs, not to exceed state per diem rates. Costs will be reimbursed based on North Dakota instate rates, even if travel is to another state facility. Commercial transportation will be reimbursed at the actual rate. The facility and custodial case manager are expected to seek the lowest possible rate when commercial transportation is required.

For foster care billing purposes, these costs are considered a reunification cost and entered as an irregular payment in CCWIPS, Category 50, Code 52. Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments in the payment system.

Verification of expenditures are required and must be retained for audit purposes.

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ND Daily Maintenance Rates -- Group and Residential Child Care Facilities

Group Home and Residential Child Care Facilities	EFFECTIVE DATE	DAILY RATE
Charles Hall Youth Services P.O. Box 1995, Bismarck, ND 58502-1995	07-01-15	(F) 268.54
Dakota Boys Ranch Assn Minot Campus Box 5007, Minot, ND 58702-5007	01-01-16	(F) 310.36
Dakota Boys Ranch Assn Fargo Youth Home 1641 31st Ave S, Fargo, ND 58103	01-01-16	(F) 310.36
Eckert Youth Homes Box 2291, Williston, ND 58802	07-01-15	(F) 307.58
Harmony House 406 4th Avenue, Devils Lake, ND 58301	01-01-16	(F) 152.96
Home on the Range 16351 I-94, Sentinel Butte, ND 58654- 9500	04-01-16	(F) 361.63
Kay's Place 1325 17th Ave SW, Minot, ND 58701	01-01-16	(F) 325.82
Prairie Learning Center 7785 St. Gertrude Ave, Raleigh, ND 58564-4103	07-01-15	(F) 248.91

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Pride Hope Home PO Box 4086, Bismarck, ND 58501	01-01-15	(F) 335.89
Serenity Christian Homes 1111 Prairie Parkway, West Fargo, ND 58078	04-16-15	(F) 256.69
Lake Oahe Group Home Standing Rock Nation* P.O. Box 176, Fort Yates, ND	04-01-16	(F) 181.43

D Desk Rate F Final Rate

58538

*Approved facility for a tribe

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Out-of-State Placements in Foster Care Group Home or Residential Child Care Facility 623-05-20-50

(Revised 4/25/16 ML #3469)

View Archives

An itemized bill is required from the out of state facility for all North Dakota foster children placed out of state following the ICPC approval. The eligibility worker must manually enter the standard maintenance payment into the payment system upon receipt of the bill. A copy of the bill must be retained in the foster care eligibility file.

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Ongoing Reimbursability 623-05-20-65 (Revised 4/25/16 ML #3469)

View Archives

Ongoing foster care maintenance payments require:

- 1. A current court order,
- 2. A current provider license,
- 3. An approved care plan (Child & Family Team meetings) and
- 4. A current group home approval for placements that require prior approval (Ex: PATH, group home, or RCCF placements).

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Irregular Payments 623-05-25 (Revised 8/15/06 ML #3025)

View Archives

<u>Irregular Payments -- Brief Summary:</u>

With appropriate approval, the eligibility worker will determine whether individual irregular payment expenditures are allowed.

Irregular payments are separated into categories, within which are various codes. Age brackets are consistent with foster care payment age categories. Age brackets are constant in all categories; however, expenditure limits vary by category. Some categories are without limit.

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Categories of Irregular Payment 623-05-25-05 (Revised 9/1/10 ML #3239)

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Eight categories of irregular payments have been established:

Category 10	School Supplies/Activities
Category 20	Clothing
Category 30	Emergency Placement
Category 40	Child Care for Foster Child
Category 50	Travel for Foster Child (Limited)
Category 60	Difficulty of Care/Excess Maintenance Payment (EMP)
Category 70	Parent/Infant Payment
Category 80	Extra Supervision

Within each category are various codes related to specific items. This data is available to you on-line for reference in regard to each child's expenditures, and to assist the department in predicting expenditures and building budgets for the foster care program.

Irregular payments have been structured to include various code categories, some categories with expenditure limits. For example, Category 10 includes school supplies, activities, etc. A fixed amount is set for this category, based on the child's age at entry to care in the current foster care episode.

The age brackets have been structured to coincide with the age brackets for the standard (basic) foster care maintenance rate, as follows:

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Age Limits	Expenditure Limit/Year
0 - 4	\$200
5 - 12	\$500
13 - Over	\$700

NOTE: For Category 10, there is a yearly expenditure ceiling per child. For example, a child age 0 – 4 has an expenditure limit for \$50/quarter or up to \$200 year. The year is computed from the first entry to care. If a child enters and leaves care during the same year, the yearly limit remains the same. The "expenditure limit/year" is a maximum amount per child limit regardless of multiple entries to foster care during that year.

The policy provides for an increased expenditure and sets an expenditure ceiling. It does not allow for exceptions.

It is the responsibility of the case manager to work with the county to determine which expenditures are necessary and appropriate, and to budget the age appropriate expenditure limit so it is available throughout the year for the child's needs.

All expenditures require receipts. Expenditures must be in accordance with state and federal foster care policy. The county certifies by "pinning" the irregular payment information on the appropriate CCWIPS screen that the expenditure is in accord with state policy. Receipts must be retained in the appropriate foster care file for audit purposes.

<u>Irregular Payments Restructured – Overview:</u>

<u>Irregular Payments in Therapeutic Foster Family Care:</u>

The Parent/Infant Payment (Category 70) and reasonable transportation costs related to maintaining a foster child in the school which he/she was

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enrolled at the time of placement (Category 50, Code 53) are the only irregular payment that applies to therapeutic family foster care.

<u>Irregular Payments in Group & Residential Care:</u>

The irregular payment policy has very limited application to children in group and residential care, as rate setting in those instances is dictated by N.D.A.C. 75-03-15.

Irregular Payments in PRTF's:

Foster care funds cannot pay for any portion of a child's cost of care in a PRTF, including irregular payments. Allowable transportation costs for the child and family, as outlined in this service chapter, should be submitted on the SFN 119 for reimbursement to the county social service board.

Other types of irregular payments can be included in the PRTF's direct rate based on historical costs as outlined in N.D.A.C. 75-02-09-06. Examples:

- "Clothing necessary to maintain a resident's wardrobe."
- "Personal supplies used by an individual resident."
- "School supplies and activity fees, when not provided by or at the expense of the school."
- "Costs incurred for providing recreation to the residents including subscriptions, sports equipment, and admission fees to sporting, recreation, and social events."

Extra supervision to maintain a placement can also be included in the facility's direct rate.

 "The Department may provide for an increase in the established rate for additional costs necessary to add services or staff to the existing program."

<u>Irregular Payments in Family Foster Care:</u>

This irregular payment policy applies to children in family foster care.

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An irregular payment is an allowable maintenance payment added to the standard (basic) foster care maintenance rate. This expenditure is approved based on the need, in accordance with state and federal policy, and entered by the county on the appropriate CCWIPS payment screen. Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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Charts - Irregular Payments 623-05-25-10 (Revised 8/15/06 ML #3025)

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Chart A

The chart entitled "Categories & Codes – Irregular Maintenance Payments – Family Foster Care" outlines the categories, ages, and expenditure limits, and the approval process. Note that several categories are without expenditure limit, such as child care for foster child. This is due to factors which make setting expenditure limits for certain categories unrealistic. The custodian and others involved must base expenditure approvals on prevailing rates and other factors. This is merely an example, the same holds true for transportation, and some other categories.

Chart B

The chart entitled "<u>Categories and Codes – Family Foster Care – Irregular Payments – Summary & Examples of Allowable and Non Allowable</u>" provides the categories and a brief summary of what is allowable as irregular maintenance and what is not.

<u>Group & Residential Care – Irregular Payments:</u>

The irregular payment policy has very limited application for group and residential care, as rates for those facilities are governed by N.D.A.C. Section <u>75-03-15</u>.

Please refer to the following:

Chart C

"Categories and Codes – Group & Residential, Irregular Maintenance Payments."

Chart D

"Categories and Codes – Group & Residential Irregular Payment Policy, Examples of Allowable & Non-Allowable Expenditures."

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In all instances, the payment must be appropriate, within foster care guidelines, and be approved through Child and Family Team meetings and the regional supervisor.

The CCWIPS system has edits to alert you to an inappropriate irregular payment for a residential facility.

CFS plans a regular on-going audit sample to identify any problems or issues with the revised irregular payment system.

For technical assistance related to the CCWIPS payment system, please call the Help Line at 1-800-429-8829.

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Irregular Payments - Explanation by Selected Categories 623-05-30

Category 10 - School Supplies/Activities 623-05-30-05 (Revised 8/15/06 ML #3025)

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- 1. Field trips, shop supplies, school pictures, class ring.
- 2. Non-clothing athletic equipment/athletic shoes, personal incidentals. (family foster care only)
- 3. Prom dress/tux.
- 4. Camps any type
- 5. Music lessons/lease/purchase of musical instruments
- 6. Individualized circumstances.

The above irregular items must be explained and be within the maximum limits. There will be no exceptions.

All of these expenditures require receipts.

Expenditures under Category 10 cannot exceed the age appropriate limit during a one-year time period. The year begins when a child is initially placed in a foster care "paid" placement. This date is referred to as the "Expenditure Limit Date." If a child was in a foster care "paid" placement for a period of time, returned home, and then went back into foster care, the "Expenditure Limit Date" would remain the same if the return to placement is within the twelve-month period. If, however, the child returned to foster care after the "Expenditure Limit Date" has expired, a new date will be established and the allowance reset for a year from that date.

The following is a case example of the "Expenditure Limit Date" and the "expenditure time period" for a child who enters foster care, leaves, and re-enters care:

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Enters foster care

Child Age 11, Limit \$500

Enters paid foster care setting 6/1/03*

Expenditure Limit Date = 6/1/03

Expenditure time period = 6/1/03 - 5/31/04

Child returns home 12/1/03 with total

Expenditures in Category 10 = \$450.

The remaining balance in Category 10 = \$50.

A. Same child <u>returns</u> to foster care BEFORE the

"expenditure time period" ends:

Child returns to foster care setting 3/1/04.

Expenditure Limit Date = 6/1/03

Expenditure Limit Date = 6/1/03

Expenditure time period = 6/1/03 - 5/31/04.

Balance available under Category 10 until 6/1/04 = \$50.

B. Same child returns to foster care AFTER the

"expenditure time period" ends:

Child returns to foster care setting 6/14/04.

Expenditure Limit Date remains 6/1/04.

Expenditure time period = 6/1/04 - 5/31/05.

Amount available under Category 10 until 6/1/05 - \$500.

C. Same child <u>returns</u> to a paid foster care setting after a lapse of one year.

"Child returns to a paid foster care setting 12/5/04

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Expenditure Limit Date is reset to 12/5/04.**

Expenditure time period = 12/5/04 - 12/4/05.

Amount available under Category 10 until 12/5/05 - \$500.

- * State is responsible for maintenance payments.
- ** When a child has not been in a paid foster care placement for twelve consecutive months, the expenditure limit date is reset.

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Category 20 - Clothing for Foster Care Children General Information 623-05-30-10

(Revised 11/15/13 ML #3392)

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Foster care children's clothing needs are to be met in accordance with the policies set forth in this chapter, as well as regulations set forth in NDAC <u>75-03-15</u>, concerning reimbursement for residential child care facilities and group child care facilities licensed by the State of North Dakota.

Each child in foster care should have enough clothing for reasonable changes. Adequacy, condition, and styling of garments are particularly meaningful for some children. The worker supervising the case has responsibility for knowing if the child is adequately clothed and if the child has an opportunity to participate in the selection and purchase of a new clothing, if of an age to have such interest. When a child leaves a foster home the child should have with them all the usable clothing, which has been purchased for them.

An inventory must be conducted of a child's clothing prior to any placement or change in placement in foster care. A copy of the most recent inventory should be sent with the child at the time of initial placement as well as all other subsequent placements. A copy shall be kept by the agency making the placement, as well as the financial county.

Clothing Allowances/Family Foster Care

<u>Initial Clothing Allowance - Family Foster Care</u>

The initial clothing allowance is available to a child when he/she enters a paid foster care setting. During the first five months after the child's entry to foster care, the child's clothing needs can be met with an initial clothing allowance, if needed. The initial clothing allowance must be requested/approval received; clothing purchased and receipts submitted to the county – during the first five months. The county has until the end of the sixth month to enter the information on the CCWIPS system to generate payment for the initial clothing allowance.

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In order for a child to receive the initial clothing allowance again, the child must have been out of foster care for a 12-month period (this is a date specific period).

The maximum rates for initial clothing allowances are:

Category	20.	Code	21
Category	~~,	COGC	

0-4 - \$400

5-12 - \$400

13 and over - \$400

Example:

Child, age 11, enters a paid foster care setting on 6/1/13. Initial clothing allowance of \$400 was expended within the first five months of placement. Child returns home on 12/1/13.

This child will not be eligible to receive the initial clothing allowance until he/she has been out of foster care for a 12-month period, or in this case, until 12/1/14. If the child returns to a paid foster care setting prior to that date, the initial clothing allowance will not be available.

The maximum initial clothing allowance must be purchased with the consultation and prior approval of the county having financial responsibility for foster care payments. The financial county must be supplied with receipts for the items purchased. Use Category 20, code 21, "Initial Clothing Allowance." Enter on appropriate CCWIPS screen.

<u>Special Clothing Allowance - Family Foster Care</u>

A special clothing allowance may be authorized to replace clothing lost in a fire, flood, theft, other type of disaster, or for sudden spurts of growth. The special clothing allowance rate is for emergency and extraordinary circumstances and should rarely be used in meeting the needs of the foster child. The special allowance is not an entitlement, but an exception. Use Category 20, code 22, "Special Clothing Allowance." Enter on appropriate CCWIPS screen.

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

<u>Summary Chart - Clothing - Family Foster Care</u>

Type Clothing Allowance	Procedure	
Initial	Need basis. Consultation and prior approval of county financial responsibility. Original receipts required.	
Special	Need basis. Consultation and prior approval of county of financial responsibility. Original receipts required.	
Regular/	Built into daily* rate paid to foster parents.	
On-going	Age 0 - 4 \$50	
Clothing	Age 5 - 12 \$60	
Needs	Age 13+ \$70	

Clothing Allowance/Group & RCCF Care

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<u>Initial Clothing Allowance - Group/RCCF</u>

During the first five months after the child's entry to foster care, the child's clothing needs can be met with an initial clothing allowance, if needed. The initial clothing allowance must be requested/approval received; clothing purchased and receipts submitted to the county – during the first five months. The county has until the end of the sixth month to enter the information on the CCWIPS system to generate payment for the initial clothing allowance.

An inventory must be conducted of a child's clothing prior to any placement or change in placement in foster care. A copy of the most recent inventory should be sent with the child at the time of initial placement as well as all other subsequent placements. A copy shall be kept by the agency making the placement, as well as the financial county.

The maximum rates for initial clothing allowances are:

Category 20, Code 21

Child's Age	<u>Maximum Allowance</u>
0 - 4	\$400
5 - 12	\$400
13 and over	\$400

The initial clothing allowance (within above limits) may be purchased, if needed. Direct reimbursement is available to the GROUP/RCCF based on submitting original receipts, which can be traced to the child. The receipts should be submitted to the county having financial responsibility for foster care payment. Prior approval of the county having financial responsibility for foster care payment is required. Use Category 20, code 21, "Initial Clothing Allowance." Enter on appropriate CCWIPS screen.

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Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

Special Clothing Allowance - Group/RCCF

A special clothing allowance may be utilized to replace clothing lost in a fire, flood, theft, other type of disaster, or for sudden spurts of growth. The special clothing allowance rate is for these emergency and extraordinary circumstances and should <u>rarely</u> be used in meeting the needs of the foster child. The special allowance is not an entitlement, but an exception. <u>Prior approval of the county director/designee of the financially responsible county is required.</u> Direct reimbursement is available to the GROUP/RCCF based on the original receipts which can be traced to the individual child. The receipts should be submitted for reimbursement to the county having financial responsibility for foster care payment.

Category 20, Code 22

<u>Child's Age</u>	<u> Maximum Allowance</u>
0 - 4	\$250
5 - 12	\$325
13 and over	\$400

The special clothing allowance is <u>not an automatic payment</u>. It is intended that this be utilized to purchase clothing in the circumstances outlined above and if <u>needed</u>. Use Category 20, code 22, "Special Clothing Allowance." Enter on appropriate CCWIPS screen.

It is anticipated that the maximum initial allowance and the special clothing allowance will be utilized to purchase groups of clothing necessary to meet the child's needs up to the maximums outlined. The child's caseworker and the facility must work together to ensure that the child's basic clothing needs are met.

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Whenever possible, the foster child should be involved in the clothing selection and purchase process to enable the child to learn the economics of budgeting and clothing selection, prepare the child for independence, as well as to afford the child a chance to exercise choices.

There may be exceptions to the above outlined payment procedure for clothing in out-of-state GROUP/RCCF foster care. This is due to the fact that the rates for out-of-state care are set by other states, and clothing may or may not be included in the ongoing rate.

Summary Chart - Clothing - Group/RCCF

TYPE

CLOTHING

ALLOWANCE PROCEDURE

Initial Need basis. Direct reimbursement based on

Allowance individual receipt that can be traced to individual child. Prior approval of

director/designee of county having financial

responsibility for foster care payment.

Special Need basis. Prior approval of county

Allowance <u>director/designee of county having financial</u>

<u>responsibility for foster care payment</u>. Direct reimbursement based on individual receipt

that can be traced to individual child.

Regular/ Met with funds provided in rates

On-Going established by NDDHS through provider audit process. Receipts of all clothing purchased for REGULAR/ON-GOING

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Needs

CLOTHING NEEDS must be maintained by facility and will be used in determining the following years approved rate. The receipt must identify the specific child for whom the clothing was purchased.

Out-of-State GROUP/RCCF Clothing Allowance:

There may be exceptions to the above outlined payment procedure for clothing in <u>out-of-state</u> GROUP/RCCF Care. This is due to the fact that rates for out-of-state care are set by other states, and clothing may or may not be included in the ongoing rate. In out-of-state placements, it may sometimes be necessary to utilize irregular payments for on-going clothing needs.

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Category 30 - Emergency Placements 623-05-30-15 (Revised 11/15/13 ML #3392)

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Payment Information - Other

When a placement requires a decision of critical importance concerning the child, the county having financial responsibility for foster care payment will make the decision in consultation with the custodian. Placements made in critical situations, i.e., <u>emergencies</u> may receive a daily rate of \$35 per day for the first 15 days placement. If care extends for more than 15 days, the regular daily rate will apply beginning with the 16th day of placement. Use Category 30, and enter code 31, "Emergency Foster Care Placement" on the appropriate CCWIPS payment screen.

This irregular payment is computed by subtracting the daily age appropriate rate from \$35.00. The difference will be paid as an irregular payment, Code 31, "Emergency Foster Care Placement."

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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Category 40 - Child Care for Foster Children - Limited Use 623-05-30-20

(Revised 8/15/06 ML #3025)

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Child care (day care) is not an entitlement, but is one option open to consideration by the Permanency Planning Committee in an attempt to arrive at the best possible situation for the foster care child.

The department continues to encourage the placement of young children with foster families where one of the parents is available at home for the child in foster care. Strive for placements where the foster child will not have an alternative arrangement during foster parent working hours. If alternative care is contemplated, it must be thoroughly discussed in the Child and Family Team meeting in terms of what is the best plan for the foster child.

North Dakota's policy for child care related to foster care was updated based on recent interpretations from the Administration for Children & Families, (ACYR-CB-PIQ-97-01).

For foster care reimbursement, child care must be provided by a provider that is licensed, certified, or has some other formal status under early childhood regulations. In North Dakota, the status is licensed, certified, registered, or approved relative to the foster child. Follow the guidelines of the Childcare Assistance Program. This is in accordance with federal requirements. Informal, episodic child care need not have such status and is presumably included in the basic foster care maintenance rate.

Child care that provides daily supervision during a foster parent's working hours when the foster child is not in school is an allowable expenditure for foster care maintenance. Also allowable are child care costs which facilitate the foster parent's attendance at activities which are beyond the scope of "ordinary parental duties."

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Child care is an allowable maintenance expenditure when the foster parent(s) is required to attend case conferences, team meetings, and court hearings without the foster child.

<u>Child Care Expenses - Claiming</u>

The reimbursement ceiling for child care expenses is based on community standards.

In order to claim foster care maintenance reimbursement for any child care expenditures during the foster parent's employment, or child care justified as being beyond the scope of ordinary parental duties, the need must be discussed in Child and Family Team meeting and documented in the foster child's permanency plan. Childcare billings signed by both the foster care provider and child care provider are required and must be retained in the child's county case file for audit purposes. The billing must contain the actual hours childcare is provided during each day, hourly (monthly) rate, and total amount due.

Example:

Child's Name: John Smith

Age: 3

Month/Year: December,

2002 Total Hours/Rate:91 hours @ \$2.25/hour

Amount Due: \$204.75

Childcare provider's signature: Foster parent's signature:

Date:

Click <u>here</u> to view table example.

The county enters Category 40, "Child Care Expenses," on the appropriate CCWIPS payment screen.

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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The cost of child care to provide for the foster parent's attendance at mandatory foster parent training is an allowable foster care expenditure. Refer questions to Children and Family Services -- Training Center at the University of North Dakota (CFS-TC) at 701-777-3442 regarding child care reimbursement for approved foster parent training.

Reference Chart - Appendix: T

"Child Care/Day Care - Quick Reference Related to Foster Care."

Child Care Expense Not Allowed under Foster Care Maintenance

The federal policy statement cited the legislative history of P.L. 96-272, which stated "payments for the costs of providing care to foster children are not intended to include reimbursement in the nature of a salary for the exercise by the foster family parent of ordinary parental duties." Accordingly, child care provided to a foster child to facilitate a foster parent's participation in activities that are within the realm of "ordinary parental duties" or child care activities which are deemed a social service are not reimbursable under foster care maintenance.

Examples:

Child care within the realm of ordinary parental duties, i.e. during illness of foster parent, is not reimbursable under foster care maintenance.

Relief care for foster parents is <u>not reimbursable under foster care</u> <u>maintenance</u>. Assuming the demands and needs of the child require, a "difficulty of care" payment could be considered to address the complexities of the situation and provide support to the foster parents.

Attendance at school conferences is an ordinary parental duty. The cost of child care to provide for the foster parent's attendance at school conferences is not an allowable expenditure under foster care maintenance.

Child care provided to facilitate a foster parent's visit to a foster child who is temporarily out of the foster home (hospital, camp, etc.) is <u>not an allowable foster care maintenance expenditure</u>.

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Special needs of a foster child best met in an early childhood care (day care) setting: Therapeutic child care is a social service and is <u>not an allowable expenditure under foster care maintenance</u>. If child care is full time, it is considered beyond socialization. Otherwise, consider whether a difficulty of care payment is appropriate.

Full time child care -- not employment related -- is <u>not allowable under</u> <u>foster care maintenance</u>.

Child care provided to enhance a child's social skills/peer relationships/socialization is <u>not reimbursable under foster care</u> <u>maintenance</u>. Difficulty of care payments could also be considered in a demanding situation, with the foster parent making the arrangements.

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Category 50 - Transportation Costs 623-05-30-25 (Revised 4/22/2015 ML #3442)

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Arranging for and paying costs of necessary transportation for a child or parent to the foster home or a group or residential facility to which referral is being made is the responsibility of the county social service board, if the parents are unable to pay for transportation and eligible to receive assistance.

The policy related to transportation reimbursement for foster care is as follows:

<u>Transportation Reimbursement for Foster Child</u>

Foster care maintenance reimbursement for transportation for the foster child is allowable in various circumstances. Certain items are presumed to be included in the basic foster care maintenance rate, and no additional reimbursement can be claimed. (Examples of costs included in basic maintenance rate are costs of local transportation such as sporting events and extra curricular activities.) Other items (such as a foster child's visit home) may be reimbursed in addition to the basic foster care rate.

<u>Transportation for Medical Services</u>

Questions regarding cost of transportation for medical services should be referred to the Medical Assistance program or refer questions for specific situations to the eligibility staff in the county having financial responsibility for the child. Transportation for medical services is not reimbursable with foster care funds.

Allowable as Separate Item of Maintenance Expense for Foster Child

The foster child's visits home or travel to another location to visit their parents, siblings, relatives, or other caretakers are allowable as separate items of maintenance expense. Since it is not always possible or appropriate for the child's visit to take place at the child's home, reasonable transportation costs for visits at locations other than the child's

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home (child welfare office or other location deemed appropriate by agency) are allowable. These are allowable maintenance expenses for the foster child only.

A separate maintenance payment is allowable to reimburse foster parents who provide reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. Reimbursement will not exceed the State rate.

Allowable Administrative Expense

The child's attendance at administrative case/judicial reviews is not an allowable maintenance activity. However, these costs are allowable as administrative costs claimed for reimbursement on SFN 119, because they provide for the proper and effective administration of the state plan.

The foster child's transportation to and from pre-placement visits is not an allowable foster care maintenance expenditure. However, placement of the child, including pre-placement visits, is an example of an allowable administrative costs, claimed on SFN 119.

Placement of Child in Foster Care

Regulations at CFR 1356.60(c)(2) state that placement of the child is an example of an allowable administrative cost.

Pre-placement Visits in Family Foster Homes

Travel of the child to a pre-placement visit in family foster care is an allowable foster care administrative cost. Reimbursement is available to the county on SFN 119, "Monthly Summary of CSSB Operating Expenditures." Federal funds can be accessed if local matching funds are provided. No state general fund dollars are available.

Examples of allowable expenditures are meals, lodging, mileage, or commercial transportation expenses. Total expenditures must be within allowable North Dakota in-state per diem rates, even if the travel is to another state. The child's custodian and case manager are expected to seek the lowest possible rate when commercial transportation is required.

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Receipts are required and must be retained by the county for audit purposes.

Pre-placement visits and approval for same must be discussed at Child and Family Team meeting, and documented.

Follow guidelines in section on "Claiming Reimbursement" on SFN 119. Also, refer to "Pre-Placement Visits in Family Foster Home: Transportation for Child. Quick Reference."

Non-allowable Expenses

Reimbursement of expenses to transport the foster child to and from school is <u>not allowable</u>, unless travel involves transporting the child to the school in which the child is enrolled at the time of placement.

<u>Transportation Reimbursement for Parent/Siblings/Foster Parents</u>
Travel by foster parents, parents, and siblings to visit the child is reimbursable:

- A visit to a child in family foster care by the foster parents, parents, and siblings is an allowable expenditure under Title XX, Social Service Block Grant, or Title IV-B, Child Welfare Services. The costs will be reimbursed on the "Monthly Summary of CSSB Expenditures," SFN 119. The expenses will be identified as "visit to child in family foster care."
- 2. A visit to a child in a residential facility by the foster parents, parents, and siblings is an allowable <u>maintenance</u> expense and reimbursed through the CCWIPS payment system, Category 50, Code 52.
- 3. Transportation to provide for foster parent attendance at administrative case/judicial review and mandatory case conferences/team meetings is an allowable Title IV-E <u>administrative</u> expenditure. The costs will be reimbursed on the "Monthly Summary of CSSB Operating Expenditures," SFN 119. The expenses will be identified as "foster care transportation."

Visitation Costs for Child's Family - Parent Responsibility

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Parents have a responsibility to be involved and pay their own transportation and other expenses related to visitation of their children in foster care, if they are able. This is separate from any amount they pay to child support.

In instances where the parents determine they are unable to pay their transportation related expenses and request assistance, they have the opportunity to make application to county social services (financial county) for transportation reimbursement.

<u>SFN 1023</u>, "Foster Care Transportation Reimbursement Budget Sheet," is designed to determine eligibility for transportation reimbursement. It is to be completed once by the child's parent(s), no redetermination is required. Based on the information on the completed form, the parent(s) are either "eligible" or "not eligible" for transportation reimbursement, whether the child is in family or residential care.

Visitation costs by the child's family to the child's foster care setting are reimbursable. However, reimbursement for visitation costs differs between facility care (group/RCCF/RTC), and family foster care. (See below.) Examples of these costs include occasional family mileage or commercial transportation expenses, meals, and lodging. Total expenditures must be within allowable North Dakota in-state per diem rates, even if the travel is to another state. Receipts are required and must be retained by the county for audit purposes. The custodian and case manager are expected to seek the lowest possible rate when commercial transportation is required. Note that this section applies to the child's family, not the child.

Visitation travel for the family and approval for same must be discussed and documented in the child's case plan and on-going permanency planning reviews. "Visitation Expense Reimbursement for Child's Family to Visit Child, Quick Reference."

Visits to Child in Group/Residential Care

Administrative costs to facilitate reunification are allowable in group/residential care. Costs for such visits are submitted as an irregular payment for reunification, Category 50, code 52. Receipts are required and

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must be retained in the county file for audit purposes. <u>Note that this section applies to the child's family, not the child</u>.

Examples of these costs are family expenses, meals, lodging, occasional mileage, or commercial transportation to facilitate visitation or participation in family week with a child in foster care at a facility.

We will pay actual costs within the amount of state per diem rates. Costs will be reimbursed based on North Dakota in-state rates, even if travel is to a facility in another state. Commercial transportation will be reimbursed at the actual rate. The facility and case manager are expected to seek the lowest possible rate, when commercial transportation is required.

<u>Visits to Child in a Psychiatric Residential Treatment Facility (PRTF)</u>

If eligible to receive assistance for transportation costs, travel by foster parents, parents, and siblings to visit the child are allowable administrative costs. The costs will be reimbursed on the "Monthly summary of CSSB Operating Expenditures," SFN 119. The expenses will be identified as "foster care transportation."

Examples of these costs are family expenses, meals, lodging, occasional mileage, or commercial transportation to facilitate visitation or participation in family week with a child in foster care at a PRTF.

Travel by a child to visit parents and siblings is also an allowable administrative cost. The costs will be reimbursed on the "Monthly Summary of CSSB Operating Expenditures," SFN 119. The expenses will be identified as "foster care transportation."

Claiming Reimbursement on SFN 119

For those allowable transportation items claimed on SFN 119, the county pays the cost of the transportation, meals, etc., within state rates. In claiming reimbursement, identify the expenditure as either "Foster Care Transportation" or "Visit to Child in Family Foster Care."

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Claims must be timely and submitted within the current fiscal year. Effective July 1, 2002, no state general funds are available. Counties are responsible for a local match.

Documentation

When transportation expenses are reimbursed either on SFN 119 or as an irregular payment on CCWIPS, receipts must be retained in the county file for audit purposes.

Quick Reference Charts - Transportation

Several "Quick Reference" charts are included to assist staff in determining what transportation costs are reimbursable, and in what manner those costs will be reimbursed. Those charts are:

- 1. Transportation Reimbursement -- Quick Reference.
- 2. <u>Visitation Expense Reimbursement for Child's Family -- Quick</u> Reference
- 3. Pre-placement Visits in Family Foster Home: Transportation for Child.

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Category 60 - Excess Maintenance Payments (EMP) 623-05-30-30

(Revised 4/1/15 ML #3438)

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All Excess Maintenance Payments (EMPs) must be discussed at Child and Family Team meetings and approved in advance by the regional supervisor. **Retroactive payments are inconsistent with state policy**.

The Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form (SFN 1865) is to be completed by the case manager when an Excess Maintenance Payment (EMP) is being considered. The child's behavior/needs must be carefully assessed prior to completing the rating form. The total score will assist in determining the appropriate EMP level of care. The level will be reviewed at every foster care child and family team meeting.

A family foster care rate may be negotiated in <u>excess</u> of the standard rate in special circumstances when the child has special needs or difficulty of care which significantly affects her/his adjustment or cost of care. There are two types of excess maintenance payments:

1. Levels I, II, and III.

Specialized Family Foster Care where an excess maintenance payment is included as part of the total maintenance payment. For payment purposes, this is a Level I, II or III excess payment.

	<u>Category 60</u>	
Level I	Code 61	\$1.67/day
Level II	Code 62	\$3.33/day
Level III	Code 63	\$5.00/day

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Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

2. Level IV (Category 60)

The regional supervisor discusses the Level IV excess payment (EMP) request with the Foster Care Administrator prior to approval. A determination will be made based upon the pertinent facts surrounding the request for increased compensation. It must involve a substantial physical, emotional, or behavioral problem, which has also been thoroughly discussed during the permanency planning process. The approval from the regional supervisor must include the amount of the Level IV, start and stop dates and the name of the family foster care provider. The stop date should not exceed the court order date or the end of the biennium, whichever is earlier. **The EMP must be approved in writing by the regional supervisor and state office prior to making payment**.

The CCWIPS payment system will allow only one EMP payment for the same service dates. For example, a foster family receiving a Level I EMP payment cannot receive a Level IV payment for the same service dates. In these instances, call the Help Desk 1-800-429-8829.

Foster parents are entitled to payment of a full day for the first day and the last day for which they provide care.

Regional supervisor will send a copy of the regional approval for the increased compensation to Administrator, Foster Care Program, Children and Family Services, North Dakota Department of Human Services.

Enter the information on the appropriate CCWIPS screen. Level IV payments are Category 60, code 64.

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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Category 70 - Minor Parent/Infant Foster Care 623-05-30-35

(Revised 8/15/06 ML #3025)

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This applies to situations where the infant has not been adjudicated deprived.

Federal law was amended (Sec. 9133, COBRA, 1987 amended Sec. 475 (4) of Title IV-E of Social Security Act) to provide expanded foster care payments in cases where the foster care recipient is a child with a son or daughter living in the same foster home or child care institution.

Effective October 1, 1988, included in the foster care payment for the minor parent will be an amount necessary to cover the maintenance and other costs of the son or daughter. The amount for the son or daughter living with the minor foster child will follow the age appropriate foster care rate schedule.

To include the amount for the son or daughter living with the minor parent in foster care, include an irregular payment as Category 70, "Parent/Infant Payment."

Also, effective October 1, 1988, the state is prohibited from including in an TANF assistance unit any son or daughter of a minor parent receiving such foster care maintenance payments.

If the minor parent and child are later separated, the needs of the child can no longer be included in the minor parent's foster care payment. In such cases the child's need and eligibility for TANF or foster care must be determined based on the child's current and individual circumstances.

A child whose costs in a foster family home or child care institution are covered by the Title IV-E foster care maintenance payments being made

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with respect to his/her minor parent is eligible for medical assistance under Title XIX. Refer to Manual Chapter 510-05 (Medicaid Eligibility Factors), or contact Medical Services if you have questions.

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Category 80 - Extra Supervision 623-05-30-40 (Revised 8/15/06 ML #3025)

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<u>CODE 81 – Extra Supervision -- Group/Residential Care:</u>

Infrequently, a child requires extra one-on-one supervision in residential care for a limited period of time, to stabilize or transition the child to a setting that may better address the child's needs. Prior to considering a request for extra supervision in a facility, the social worker must thoroughly review the situation to ensure that the current setting is indeed an appropriate care situation for the child for the time being. Or, is the child's behavior such that hospitalization or another placement is required.

CODE 81 approval requires permanency planning, regional supervisor, and state foster care administrator prior approval. When granted, approval is for a specified one-on-one caregiver, for a set amount of hours per day at a specified rate, and for a limited period of time. It is rarely used, but available in special, limited circumstances.

Enter CODE 81, "Extra Supervision, Group/Residential Care," on the appropriate CCWIPS screen.

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Education 623-05-35 (Revised 1/15/12 ML #3306)

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When the care of a child is paid through foster care funds, it will ordinarily be expected that the child will attend a public school. **Foster care funds are not used for educational services** including correspondence courses. Education needs of the child either in North Dakota or out-of-state are the responsibility of the local school district and/or the Department of Public Instruction (DPI). Education placements (Boarding Care) are the total responsibility of the local school district and/or DPI. Discuss funding for any educational needs for foster care children with the local school district.

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REPEALED

College or Vocational School 623-05-35-05 (Repealed 1/15/12 ML #3306)

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Boarding Care for Special Education Students 623-05-35-10

(Revised 11/1/10 ML #3250)

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Funds for children who require board and room to attend special education classes are available through the local school district in cooperation with the Department of Public Instruction. This service is considered <u>boarding care</u>, and is not foster care. The foster care payment program is <u>not available</u> to children who need board and room (boarding care) to be able to attend special education classes to meet their educational needs and who otherwise would be living at home. Questions regarding boarding care should be referred to the local special education director at the public school system.

Children who are under the care, custody, and control of a public agency, or the North Dakota Department of Human Services in foster care and in need of special education classes continue to be eligible for foster care payments for the days the child is physically in the foster home.

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Purchase of Foster Care From Other Agencies 623-05-45-05

Classification of Agencies 623-05-45-05 (Revised 3/13/15 ML #3434)

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The incorporated and licensed agencies are:

- 1. Agencies licensed to make foster home placements:
 - Catholic Charities North Dakota, 5201 Bishops Boulevard Suite B, Fargo, ND 58104
 - Christian Family Life Services, 203 South 8th Street, Fargo, ND 58102
 - Lutheran Social Services, Box 389, Fargo, ND 58107
 - PATH-ND (Professional Association of Treatment Homes), 1202
 Westrac Dr S, Suite 100, Fargo, ND 58103
 - The Village Family Service Center, 1201 25th Street South, Box 9859, Fargo, ND 58106-9859
 - LDS Family Services,6120 Earle Brown Dr #20, Brooklyn Center, MN 55430
 - God's Children Adoptions, 23592 Ridgewood Circle, Fergus Falls, MN 56537
- 2. <u>Licensed group and residential child care facilities (RCCF)</u>:
 - Charles Hall Youth Services, Box 1995, Bismarck, ND 58502, (Phone: 255-2773) operates:
 - Charles Hall Home at 320 South 14th Street, Bismarck, ND
 - GoodBird Home, 1417 East Divide Avenue, Bismarck, ND
 - Laramie Group Home at 1120 Laramie Drive, Bismarck, ND
 - Eckert Youth Homes, 1102 7th Avenue East, Williston, North Dakota 58801 (Phone: 572-7262)
 - Lake Region Special Education (Phone: 662-5036) operates:

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- Harmony House, 406 4th Avenue, Devils Lake, North Dakota 58301
- Dakota Boys and Girls Ranch RCCF, Box 5007, Minot, North Dakota 58702
- Dakota Boys Ranch Fargo Youth Home, 1641 31st Ave S, Fargo North Dakota 58103
- Home on the Range for Boys, 16351 I-94, Sentinel Butte, North Dakota 58654 (Phone: 872-3745)
- Prairie Learning Center, 7785 St. Gertrude Avenue, Raleigh, North Dakota 58564 (Phone 701-597-3419)
- Lake Oahe Group Home of Standing Rock Nation, P. O. Box 176, Fort Yates, ND 58538 (Phone 701-854-3603) Approved facility for Tribe.
- 3. The following is a list of ND Psychiatric Residential Treatment Facilities (PRTFs):
 - Ruth Meiers Grand Forks,, ND
 - Western Plains DBGR Bismarck, ND
 - Dakota Boys & Girls Ranch Fargo, ND
 - Luther Hall Fargo, ND
 - Pride-Manchester House Bismarck, ND

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Medical Services Payment - Children Eligible for Title XIX Under Care of Child-Care Agencies and Family Foster Care Homes 623-05-45-10

(Revised 8/15/06 ML #3025)

View Archives

Medical Assistance Eligibility questions regarding particular foster children should be referred to county of financial responsibility. Licensed child care agencies or family foster care providers need to inform the medical provider of the foster child's medical assistance eligibility status.

Payment procedures for medical assistance to medically eligible foster children are the same as for any other eligible Medicaid recipient. Providers have authorizations for payment and when services are rendered the medical provider can bill medical services division directly.

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Medicaid Identification Card 623-05-45-15 (Revised 8/15/06 ML #3025)

View Archives

A Medicaid Identification Card is issued to each Medicaid recipient shortly after Medicaid eligibility has been established. The foster child will receive such a card.

The Medicaid Identification Card must accompany the child from placement to placement, whether the child is in care in a family foster home, group home, or residential facility.

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Emergency Assistance 623-05-50 (Revised 8/15/06 ML #3025)

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Emergency assistance is the provision of out-of-home care to eligible families with children who are experiencing an emergency.

An emergency exits because:

- 1. A child is in out-of-home care; or
- 2. A child is at risk of out-of-home care; or
- 3. A child is the subject of a child abuse or neglect report; and
- 4. The emergency did not arise because an adult family member refused (without good cause) employment or training.

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Application 623-05-50-05 (Revised 8/15/06 ML #3025)

View Archives

Emergency Assistance Service Application, SFN 38, is to be made by a parent/guardian or representative or a legal custodian.

When a child is in foster care, the legal custodian may make application and sign for emergency assistance. This would include a representative of a county social service board, Division of Juvenile Services, or in situations where the parental rights have been terminated, the designee of the Executive Director of the North Dakota Department of Human Services.

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How to Make Sure That There is not More Than One Application on the Same Facility Within a Year Given the Variety of Services 623-05-50-10

(Revised 8/15/06 ML #3025)

View Archives

Since the state has defined emergency assistance broadly, it is not necessary to have a separate service application each time the family receives a different service. For example, if a family received intensive inhome service for three months and then a child went into foster care, it is not necessary to have a new emergency assistance service application form. Thus, there would only be nine months of service eligibility left for the foster care. If the emergency continues, an emergency assistance application will need to be completed.

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Eligibility 623-05-50-15 (Revised 8/15/06 ML #3025)

View Archives

Eligibility is to be determined by the Director, County Social Service Board, or their designee, based on the information provided to them by the applicant. In order to be eligible, the child must meet the emergency definitions listed above and:

- 1. The child must have lived with a parent or specified relative within the last six months. (The definition of a specified relative is the same as for Title IV-E.)
- 2. The child or family member currently does not have sufficient resources immediately available to pay for emergency assistance services (self-declaration by the applicant).
- 3. The application must be made by a parent or specified relative of a child under age 21 or by a legal custodian on behalf of a child under age 21. A child age 18, who signs himself back into foster care would sign the emergency assistance application (this would be considered as a review).

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Non-eligible Child 623-05-50-20 (Revised 8/15/06 ML #3025)

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- 1. A foster care child who did not physically reside with a parent or specified relative during the six months prior to the initial court order.
- 2. A child that was not eligible for Emergency Assistance prior to July 1997 and remained continuously in foster care.
- 3. A foster child who is in receipt of SSI.

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Eligibility Determination 623-05-50-25 (Revised 8/15/06 ML #3025)

View Archives

Eligibility staff at the county social service board should:

- 1. First determine if the child is eligible for Title IV-E, just as they do now.
- 2. If the child is not IV-E eligible, determine if the child is eligible for Emergency Assistance.
- 3. If the child is not eligible for Emergency Assistance, determine if the child is eligible for regular foster care.

It is emphasized that the use of Emergency Assistance federal funds does not create any new eligibility. Only children who had previously been eligible for regular or Indian regular foster care would be eligible for Emergency Assistance foster care. A child previously determined Title IV-E eligible would never become eligible for emergency assistance unless it were a new foster care episode.

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Determining Eligibility for Payment Generation 623-05-50-30

(Revised 8/15/06 ML #3025)

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An appropriate Emergency Assistance code (EA) is available for the eligibility worker to enter in the CCWIPS payment system.

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Restrictions 623-05-50-35 (Revised 8/15/06 ML #3025)

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Emergency Assistance Services are authorized for a period not to exceed 365 days in a twelve-month period from the service authorization date. Emergency Assistance is limited to a maximum duration of 12 months or less, per authorization period, as necessary to alleviate the emergency condition.

The addition of Emergency Assistance simply adds another financial alternative to the traditional regular foster care. It is not to be used when a child is IV-E eligible. Nothing in the practice of delivering foster care changes with the addition of the Emergency Assistance for regular foster care. All of the rules, policies, regulations, and guidelines pertaining to permanency planning and other eligibility criteria for foster care remain the same.

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Emergency Assistance Reauthorization 623-05-50-40 (Revised 8/15/06 ML #3025)

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Emergency Assistance is limited to 365 days in a twelve-month period. If the emergency has not been resolved to permit the return of the child to the home, another application (<u>SFN 38</u>, Emergency Assistance Service Application) is required within 30 days for a period not to exceed 365 days.

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Differential Roles of Staff 623-05-55 (Revised 11/1/10 ML #3250)

View Archives

Title IV-E, Regular Foster Care, and Medical Assistance eligibility requires certain jointly planned and coordinated activities between the income maintenance and social service staff including DJS Representative. Despite their interrelatedness, however, there is a clearly defined distinction in their roles, activities, and responsibilities.

Income maintenance personnel's responsibilities are directed to:

- 1. Determining a child's technical and financial eligibility based on information contained in the Title IV-E/Title XIX Application;
- 2. Entering payment and other information required for payment on CCWIPS.
- 3. Conducting comprehensive, periodic reviews of eligibility;
- 4. Advising the custodian of the availability of family planning and Health Tracks services;
- 5. Determining that court orders contain the appropriate language and are in effect;
- Assuring that the children in foster care meet all the other requirements to receive AFDC/FC (IV-E), pursuant to eligibility requirements as of July 16, 1996, (P. L. 104-193, Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 and the Adoption and Safe Families Act of 1997;
- 7. Determining that financial need is in compliance with AFDC and Medical Assistance standards;
- 8. Assuring that the service plan is in the eligibility file or cross-referenced to the appropriate service file.

<u>Social Service Staff and DJS Representative Activity will be Directed</u> Towards:

1. Assisting, as required by the court, in determining a child's need for foster care;

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- 2. Finding, assessing, and licensing foster homes; making sure that the foster home is licensed/approved before making placements and entering the current license on CCWIPS. This does not apply to the DJS with the exception of referring potential foster homes to the county social service board.
- 3. Arranging for and supervising a child's placement in accordance with the permanency plan;
 - a. Ensure that the eligibility worker is aware of the child's placement.
- 4. Periodically reviewing the social plan including continued need for care in a suitable placement;
- 5. Working with the child's parents or other relative towards the child's eventual return home, if appropriate;
- 6. Determining need for, and amount of, special allowances and social service payments and giving the information to the income maintenance staff;
- 7. Ensure that court orders contain the appropriate language and are in effect; and
 - a. Ensuring that the EW gets a copy of the original and all updated court orders.
- 8. Helping eligibility worker to secure eligibility information.
 - a. Social service staff, including DJS representatives, must assist the county eligibility worker in accessing all necessary information needed to determine initial and on-going foster care and Title XIX (Medicaid) eligibility.
- 9. Initiate group home placement/payment approval on FRAME;
- 10. Immediately advise regional offices of all foster care placements;
- 11. Accurate and timely entry of FRAME information;
- 12. Sign a Title IV-E/Title XIX Application and other appropriate forms as needed;
- Child and Family Team will negotiate maintenance payments above the standard rate and keep the EW informed in a timely manner of these issues.
- 14. Referring seriously disabled children to SSI; and

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15. If a child loses Title XIX (Medicaid) eligibility and it impacts on payment, it is the responsibility of the case manager to make an appropriate alternate placement.

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Forms 623-05-60

REPEALED

Understanding of the Parties for Continued Foster Care Services, SFN 1781 623-05-60-05

(Repealed 1/15/12 ML #3306)

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Forms 623-05-60

Credit Form, SFN 827 623-05-60-10 (Revised 8/15/06 ML #3025)

View Archives

Any payments to the State for foster care refunds and reimbursements must be submitted with Credit Form, <u>SFN 827</u>. The proper name and <u>foster care</u> case number must be included to ensure proper credit.

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Foster Care Placement Notification and Preliminary Eligibility Determination, SFN 630 623-05-60-15 (Revised 5/28/15 ML #3446)

View Archives

<u>SFN 630</u> is an official form designed to notify the eligibility staff that the child has entered foster care. The form is completed by the case manager and provides case specific information. A copy of the pertinent court documents should be attached when submitting to the eligibility worker. This form is used by the eligibility worker in conjunction with the <u>SFN 641</u>, Title IV-E Title XIX Application-Foster Care in determining foster care eligibility.

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Notice of Change Form, SFN 45 623-05-60-20 (Revised 11/1/10 ML #31250)

View Archives

<u>SFN 45</u>, Notice of Change Form, is a form that can be used by the social worker to notify the eligibility staff of changes in the child's situation, which will have an impact on the child's eligibility for federal funds, and to alert the eligibility staff and Child Support Enforcement to placement changes and closures.

This form is available electronically via E-Forms.

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Title IV-E/Title XIX Application, SFN 641 623-05-60-25 (Revised 8/15/06 ML #3025)

View Archives

The foster care application (<u>SFN 641</u>) is completed by the parent or the custodian, depending on the circumstances. Eligibility staff utilizes the information on the completed form to assist in eligibility determination for Title IV-E/Title XIX.

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Supplement to SFN 641 or 642, Attachment A. Data for Unemployed Parent Program 623-05-60-30 (Revised 8/15/06 ML #3025)

View Archives

This form (<u>SFN 641</u> or <u>SFN 642</u>) is utilized when there is reason to believe that a child might be eligible for Title IV-E/Title XIX through the Unemployed Parent Program. This form will not be utilized in every situation, but only in those cases where eligibility staff has determined that a child might be found eligible through the Unemployed Parent Program.

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Title IV-E Initial Eligibility, SFN 869 623-05-60-35 (Revised 8/15/06 ML #3025)

View Archives

<u>SFN 869</u> is a mandatory form and is completed once, at the child's entry to foster care, to determine eligibility for federal funds.

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REPEALED

Title IV-E Reimbursability, SFN 870 623-05-60-40 (Repealed 11/1/10 ML #3250)

View Archives

<u>SFN 870</u> is a mandatory form, which will assist in determination of the child's reimbursability for Title IV-E. Information derived from this form is used to determine the appropriate match symbol for payment purposes. This form is to be completed at initial determination, redeterminations, and for Title IV-E cases at the time of case closing.

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Title IV-E Foster Care - Income Calculation Worksheet, SFN 873 623-05-60-45

(Revised 8/15/06 ML #3025)

View Archives

The use of <u>SFN 873</u> is recommended when the household has earned income to help in the determination of Title IV-E eligibility.

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REPEALED

Title IV-E/Title XIX Redetermination, SFN 642 623-05-60-50

(Repealed 11/1/10 ML #3250)

View Archives

Title IV-E/Title XIX Redetermination, <u>SFN 642</u>, must be completed every six months and at case closing for Title IV-E cases. SFN 642, Title IV-E/Title XIX Redetermination, will need to be manually sent every six months.

You will need to maintain a tracking (tickler) system for redetermination review timeliness.

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Placement Agreement Between Counties 623-05-60-55 (Revised 8/15/06 ML #3025)

View Archives

	PLACEMENT A	AGREEMENT BETWEEN COUNTIES			
We,	CS	SSB and			
	(Sending County)	(Receiving County)			
CSSB hereby enter into the following agreement:					
		CSSB has need for foster			
care	placement of	and has			
requ	ested of	CSSB use of a			
foster care home in County. Such					
placement will be affected on, 20,					
and t	the following conditions	are agreed to between both			
coun	ties:				
	to and supervision of s responsibility of the re Child and Family Team receiving county, and	reiving County SSB, will provide ongoing services such placement, just as if this case were a legal eceiving county; in meetings shall be called regularly by the the sending county shall be notified of all meetings and will include the participation of			

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the sending county, such participation occurring by telephone or in person;

- 3. Reunification services shall be provided by the receiving county unless agreed to otherwise;
- 4. The receiving county will provide administration of the payment process of this case, unless agreed to otherwise;
- 5. The sending or receiving county may request administrative review/staffing at any time deemed essential by either county.
- 6. Other Conditions/Exceptions:

Dated this	day of	, 20	
Director	 Director		
County S	ocial Service Board		
County S	ocial Service Board		

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Emergency Assistance Service Application, SFN 38 623-05-60-60

(Revised 8/15/06 ML #3025)

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SFN 38 is available as an eform.

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Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form, SFN 1865 623-05-60-65 (Revised 3/1/08 ML #3126)

View Archives

The Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form (SFN 1865) is to be completed by the case manager when an Excess Maintenance Payment (EMP) is being considered. The child's behavior/needs must be carefully assessed prior to completing the rating form. The total score will assist in determining the appropriate EMP level of care. The level will be reviewed at every foster care child and family team meeting.

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Foster Care Transportation Reimbursement Budget Sheet, SFN 1023 623-05-60-70

(New 4/22/2015 ML #3442)

View Archives

<u>SFN 1023</u> is a form used to determine a parent's eligibility for transportation reimbursement under the foster care program.

Division 20 Program 600 Service 623 Chapter 05

Charts 623-05-65

Child Care/Day Care - Quick Reference (Related to Foster Care) 623-05-65-05

(Revised 8/15/06 ML #3025)

View Archives

Click here to view and/or print the Child Care/Day Care - Quick Reference.

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Transportation Reimbursement - Quick Reference 623-05-65-10

(Revised 9/1/10 ML #3239)

View Archives

Click $\underline{\text{here}}$ to view and/or print the Transportation Reimbursement - Quick Reference.

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Visitation Expense Reimbursement for Child's Family to Visit Child - Quick Reference 623-05-65-15

(Revised 11/15/13 ML #3392)

View Archives

VISITATION EXPENSE REIMBURSEMENT FOR CHILD'S FAMILY TO VISIT CHILD QUICK REFERENCE

FAMILY FOSTER CARE OR PRTF	GROUP/RCCF/CARE
Claim on Form 119 and identify as visit to child in family foster care or PRTF. Federal funds can be accessed if local matching funds are provided.	In facility care, this is considered an allowable foster care administrative cost to facilitate reunification.
Refer to NDDHS 623-05 for policy and limitations.	Submit costs on CCWIPS as an irregular payment, category 50, code 52.
	Refer to NDDHS 623-05 for policy and limitations.

NOTE: SFN 119, "Monthly Summary of CSSB Operating Expenditures"

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Pre-placement Visits in Family Foster Home: Transportation for Child - Quick Reference 623-05-65-20 (Revised 8/15/06 ML #3025)

View Archives

PRE-PLACEMENT VISITS IN FAMILY FOSTER HOME: TRANSPORTATION FOR CHILD QUICK REFERENCE

FOR CHILD	HOW TO CLAIM
Travel to pre-placement visit in family foster care is an allowable IV-E administrative cost.	Administrative reimbursement. Claim on SFN 119, identify as foster care transportation. Federal funds can be accessed if local matching funds are provided.
Examples of allowable expenditures are: meals, lodging, mileage or commercial transportation.	
Must be within allowable North Dakota in-state per diem rates - even if travel is to another state.	
See NDDHS 623-05 for complete policy & limitations.	
08-2002	

NOTE: SFN 119, "Monthly Summary of CSSB Operating Expenditures"

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Foster Care Transportation Reimbursement Budget Sheet 623-05-65-25

(Revised 1/26/07 ML #3051)

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Division 20 Program 600 Service 623 Chapter 05

Categories and Codes - Irregular Maintenance Payments - Family Foster Care 623-05-65-28

(Revised 11/15/13 ML #3392)

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Click here to view and/or print this document.

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Foster Care Irregular Payments Summary & Examples of Allowable & Non-Allowable Family Foster Care 623-05-65-30

(Revised 11/15/13 ML #3392)

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Division 20 Program 600 Service 623 Chapter 05

Categories and Codes Group & Residential Irregular Maintenance Payments 623-05-65-35

(Revised 11/15/13 ML #3392)

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Division 20 Program 600 Service 623 Chapter 05

Group & Residential Irregular Payment Policy 623-05-65-40

(Revised 8/15/06 ML #3025)

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